File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073



COMMITTEE NAME (Must be same as on Statement of Organization)

2010 OCT -6 PM 1:11

FOR INSTRUCTIONS, SEE BACK OF FORM

## **DISCLOSURE SUMMARY PAGE**

Anamosa Schrol Bonw Referen	idum Committee	1 1	OR-2 DISCLOSURE
IMPORTANT: Indicate by # type of committee you are reporting f (1)Statewide/Legislative/Judge Standing for Retention Candidate	for: []]		ev. 07/2007) REPORT
(4) County Central Committee (5) County Candidate (6) City Ca	andidate (7)School Board or Other Political		055
Subdivision Candidate (8) County PAC (9) City PAC (10) Scholl 11) Local Ballot Issue	ool Board or Other Political Subdivision PAC (		Office Use Only nm. #
CANDIDATE COMMITTEES ONLY:		: I	ged In
Candidate Name	Political Party (if applicable)		inned
			nputer
Office Sought	District (if Senate or House)		lited
Late reports are subject to possible chil and criminal penalties.  SIGNATURE OF PERSON FILING REPORT	Pursuant to Iowa Code sections 68B.32A(7) a		
SIGNATURE OF PERSON FILING REPORT	ELEPHONE		DATE SIGNED
I AM FILING A	REPORT FOR (1) ELECTION /(2)I	NON-EL	ECTION YEAR.
(report date)	Indicate by #	7	
☐CHECK IF AMENDMENT TO REPORT DATED			Mana anton Data of Planting
	Loca	I Commi	ttees, enter Date of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is fil	Coul	ity & Loc n Electio	al Committees, enter County in n is held
STATEMENT OF CASH ON HAI	ND		
CASH ON HAND at the beginning of the reporting period. ( committee. This amount MUST be the same as th of the last reporting period or must be zero if this is	e cash on hand at the end	\$	82 76
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Sche	edule A) (*also see in-kind below)		366.43
Schedule F: Loans Received total (Attach Schedu	• •		
Schedule H: Total Sales of Campaign Property (A			
(Schedule H applies to Candidates' Cor	·		6 10
	SUB-TOTAL	\$	44 4. 11
SUBTRACT TOTAL MONEY SPENT THIS PERIO		•	
Schedule B: Expenditures total (Attach Schedule I			449,19
Schedule F: Loan Repayments total (Attach Sched	• •		
CASH ON HAND at the end of this reporting period (if final re			-0-
	· · · · · · · · · · · · · · · · · · ·		
**UNPAID BILLS (From Schedule D - Attach Schedule D)			
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch	•		
**OUTSTANDING LOANS (From Schedule F - Attach Sched	dule F)	\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES NO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - At	ttach Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign acco	ount bank statement in January of each yea	r.	

			- 1111
200000000000000000000000000000000000000	ORGANISATION OF THE PROPERTY O	**********	

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	
_	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF
I AME	NDING FORM

COMMITTE	E NAME (Must be	same as on Statement of Organiza	lum Committee	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHO EXPENDITURE (Disbursement) WAS MADE		AMOUNT EXPENDED
8-5-10	ID# CK#	Mailing Services, I 200 50th Ave Dr S Cedar Rapads, Ia	Brochures / Account	\$ 449
	ID#	( RAY MANDS, LA	DIOCHUYEZ / ACCOUNT	- · · · · · · · · · · · · · · · · · · ·
4	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID# CK#			
	ID#			
	СК#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 449.19
			TOTAL (if last page of this schedule)	\$449.19
urchases of cer	tain campaign proper	TES' COMMITTEES ONLY: ty costing \$500 or more must also be in	oventoried on Schedule H. (Refer to Schedule H instr	uctions.)
xpenditures to posterior	persons/entities provid	ling consulting, advertising, fund-raising	g, polling, managing, organizing services must also be ade by the person/entity on behalf of the candidate's c	

of

Page

## For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

COMMITTEE NAM	F (Must be se	mo oo oo Ot		
n	- Indst be sa	nie as on Sta	ntement of Organization)	
MAMOSA	School	BAND	Referendum	Ca
		-701.0	UEALIGIM	( ) ALC ALC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	44.60	
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND- RAISEF INCOM
7-21-10	CK#	Kris & Kirk Kilburg 24532 Stone LN Anamora Ioux 52205	NA	\$ 203	
8-5-10	ID# CK#	Hole & Say Willems	NA	163	3
	ID#	Anamosa Iowa 52205			
	CK#			:	L
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	CK#				
			SUB-TOTAL	21,43	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)